Please type a plus sign (+) inside this box

10/04/01

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY	Attorney Docket	No.	AB-984-1C US						
PATENT APPLICATION	First Named Inve		Kyu-Nam Lim						
TRANSMITTAL	Title		Input Buffer Circuit						
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Lab	oel No.	EL 699 358 407 US						
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents		ADDF	Box Patent Application						
1. See Transmittal Form - see page 2 of this form. (Submit an original, and a duplicate for fee processing) 2. Application: Specification: (preferred arrangement set forth below) Descriptive title of the Invention, Cross References to Related Applications, Reference to Microfiche Appendix, Background of the Invention, Brief Summary of the Invention, Brief Description of the Drawings, and Detailed Description (all totaling 13 pages) Appendix(ces), & (pages) Claim(s) _4 pages Abstract of the Disclosure _1_ page 3. Drawing(s) (35 USC 113) [Total Sheets _8_] 4. Oath or Declaration unsigned [Total Pages] Newly executed (original or copy) Copy from prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 17 completed) C DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 13 3(b) Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.									
PRIOR APPLICATION INFORMATION: Examiner L. Nguyen Group Art Unit 2816 18. CORRESPONDENCE ADDRESS									
☐ Customer Number or Bar Code Label Name David W. Heid Attorneys for Applicant Skjerven Morrill M.			or ☑ Correspondence address below Reg. No. 25,875						
City San Jose	City San Jose State CA Zip Code 95110								

19. Fee calculations.

CLAIMS (Number Filed)	(1) FOR	(2)	(2) (3) NUMBER EXTRA			(4) RATE		(5) CALCULATIONS
.12	TOTAL CLAIMS (37 CFR 1 16(c))	-20	=	0	х	x \$18		\$ 0.00
4	INDEPENDENT CLAIMS (37 CFR 1.16(b))	-3	=	1	х	\$80	=	\$ 80 00
	MULTIPLE DEPENDENT C	LAIMS (if app	(if applicable) (37 CFR 1 18(d)) + \$270 00					
			BASIC FEE (37 CFR 1 16(a))					\$ 710 00
	Total of above Calculations						~	\$ 790 00
	Reduction by 50% for filing by small entity (Note 31 CFR 1 9, 1 27, 1 28)							
	TOTAL							\$ 790 00

20.	FEES:	The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 19-2386:									nt No.
21.	b. 🔯	Fees required u Fees required u Fees required u	nder 37 CFR	1.16. (U.S. Applic 1.17. (Conditional 1.18. (Patent Issue	Extension of)		_		
The state of the s	NOTE:	correspon	idence addr	's correspondenc ess is provided be		ll carry ov	er to this	UPA U	NLESS	a new	
2. <u>.</u> ‡	¥EW COR	RESPONDENC	E ADDRESS	<u> </u>	· · · · · · · · · · · · · · · · · · ·				· ·		
E	stomer Numl	ber or Bar Code Labe	l 					☐ Nev	v correspo	ondence addi	ress below
	NAME		<u> </u>								
	ODRESS CITY			STATE			ZIP CO	DE	T		
	UNTRY			TELEPHONE			Zh co	FAX		<u> </u>	
* 4,4,4,4,7,		23. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED Skjerven Morrill MacPherson LLP 25 Metro Drive, Suite 700 San Jose, CA 95110 Tel. (408) 453-9200 Fax. (408) 453-7979									
	}	Date: Name	David W. H	aid Esa		Dog No	25,875				
		Signature	David W. H	du, Le	if	reg. No	. 23,873				
		Express Mail Label No.	EL 699 358	407 US	,						